



## CONSENT TO PUBLISH LICENSEE PUBLIC CONTACT INFORMATION

The Cannabis Regulatory Agency (CRA) is requesting authorization to post licensee contact information on the public CRA website in an effort to make it easier for the public to communicate with licensees.

Please indicate below whether the applicant/proposed licensee consents to public contact information for the licensee being posted on our website upon licensure.

I, on behalf of the applicant/proposed licensee, consent to the CRA publishing the following contact information for the applicant/proposed licensee on the CRA website upon licensure (select all that apply and provide the requested information):			
	Public contact person's name:		
	Telephone number:		
	Email address:		
	Website address:		
	ehalf of the applicant/proposed licensee, do not coposed licensee on the CRA website.	onsent to the CRA publishing publ	ic contact information for
Applicant Entity/Proposed Licensee Name or Sole Proprietor Name		Date	
Q			
Signature of Indivi	dual Authorized to Sign on Behalf of Entity		
Individual Authori	zed to Sign on Behalf of Entity: Printed Name and Title		

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